

Transforming Health Care with Telehealth:

Today's Barriers and Tomorrow's Solutions

Mario Gutierrez, Executive Director August 28, 2014

Webinar for the Northwest Telehealth Resource Center

Center for Connected Health Policy • 877-707-7172 cchpca.org • telehealthpolicy.us

Disclaimers

- Any information provided in today's talk is not to be regarded as legal advice. Today's talk is purely for informational purposes.
- Always consult with legal counsel.
- CCHP has no relevant financial interest, arrangement, or affiliation with any organizations related to commercial products or services to be discussed at this program.





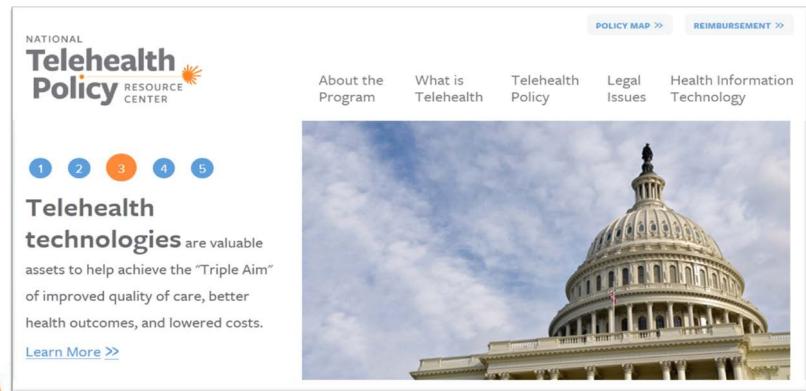
- Created with funds from the California HealthCare Foundation in 2008
- We develop and advance state and national telehealth policy solutions to promote improvements in health and health systems





www.telehealthpolicy.us

- A one-stop shop for accurate, up-to-date information on telehealth policy and legal issues
- Includes an interactive policy map that reveals telehealth laws, regulations, state Medicaid policies, and pending legislation for all 50 states and DC





Federal & State Policies





Federal Policies

- Medicare: Outdated & limited to live video & only in strictly defined rural locations
- HHS FedTel Working Group -26 Agencies
 - Identified 7 unique definitions of telehealth in use across federal govt
 - Store-and-Forward has five definitions from four agencies
 - M-Health defined in only three agencies



Current Federal Legislation

- S 596 (Thune, D-SD) Fostering Independence Through Technology (FITT) Act
- HR 2001 (Rangel, D-NY) VETS Act of 2013
- HR 3077 (Nunes, R-CA) TELE-MED Act of 2013
- HR 3303 (Blackburn, R-TN) SOFTWARE Act of 2013
- HR 3306 (Harper, R-MS) Telehealth Enhancement Act
- HR 3507 (Peters, D-CA) 21st Century Care for Military Veterans Act
- HR 3577 (Peters, D-CA) Commission on Health Care Savings Through Innovative Wireless Technologies
- HR 3750 (Matsui, D-CA) Definition for Telehealth
- HR 5380 (Thompson, D-CA) Medicare Telehealth Parity Act of 2014



FEDERAL LANDSCAPE 2014 FORWARD

FEDERAL LEGISLATION

- HR 5380 (Thompson, Harper & Welch)
 - For Medicare, phased-in increase of eligible geographic locations; adding home as eligible site; reimbursing for RPM; reimbursing for S&F
- HR 3306 (Harper, Nunes, Thompson & Welch) & S 2662 (Cochran, Wicker)
 - For Medicare, expand list of eligible originating sites including the home; small expansion of S&F to CAHs & sole community hospitals; for liability purposes services furnished at the provider's location; allows for the use of RPM in specialty medical homes contracts

OTHER FEDERAL AGENCIES

- Food & Drug Administration mHealth
- Federal Communications Commission Open Internet

OTHER FEDERAL ACTIVITIES

- Federation of State Medical Boards Licensing Compact/Interstate Licensure
- Professional Organizations Telehealth/Telemedicine Guidelines FSMB & AMA
- NPRM Medicare expansion of reimbursable services to include psychiatric care



CMS Proposed New Rules Regarding Telehealth

- Psychotherapy, psychoanalysis & wellness using telehealth to be covered as category 1 service for rural beneficiaries
- A new billing category for non-face-to-face chronic care management (CCM) services, as a unique, covered service designed to pay separately for non-face-to-face care coordination services furnished to beneficiaries with two or more chronic conditions.
 - Exempt from telehealth definition-can include asynchronous and patient monitoring, and rural residency requirement for beneficiary



The National Telehealth Policy Resource Center www.telehealthpolicy.us

- Provides thorough, accurate, and current information on telehealth policy and issues
- Provides telehealth policy tracking, analysis, and technical assistance for twelve regional telehealth resource centers (TRCs)
- Independent, nonpartisan national resource on telehealth policy issues





Current State Telehealth Policies

41 states have a definition for "telemedicine"

17 states have a definition for "telehealth"

2 states have no definition for either

44 states reimburse for live video

10 states reimburse for remote patient monitoring

7 states reimburse for store-and-forward

Most common reimbursements: consultations, mental health, and radiology Most common providers reimbursed: physicians and nurses

Most states have <u>some</u> form of reimbursement by Medicaid for telehealth delivered services, but <u>NO TWO STATES ARE ALIKE!</u>



Current State Telehealth Policies

21 states require informed consent in statute and/or Medicaid policy

23 states have some special law that applies to cross-state licensure

21 states (and DC) passed laws that impact private payers

8 states have geographic limitations

10 states include SNFs and LTCs as eligible sites

7 states include a specific list of facilities as eligible sites

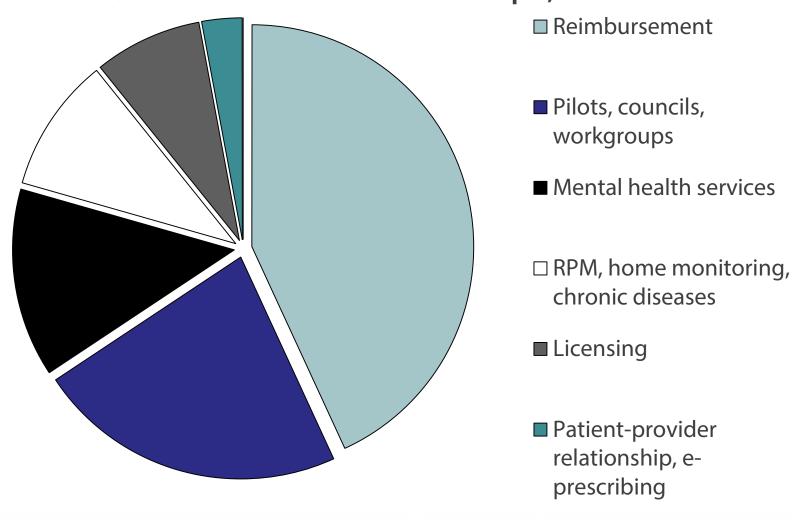
23 states are silent about location

Unique reimbursement services: home health, dental, speech-language pathology

Unique reimbursement providers: physician assistants, physical therapists, speech pathologists, dieticians, genetic counselors



ACTIVE STATE LEGISLATION: 192 ACTIVE BILLS*as of April,2014





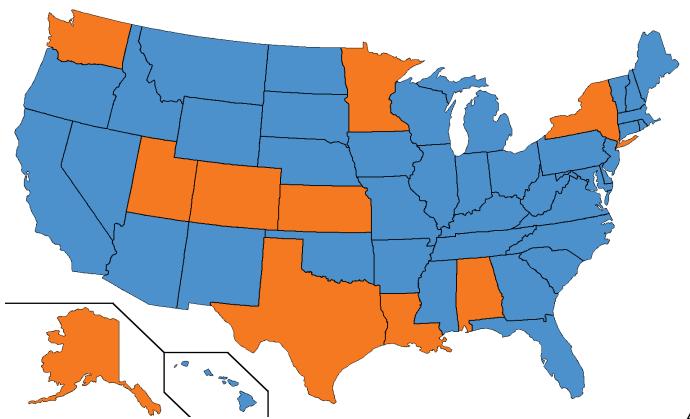
Remote Health Monitoring





MEDICAID: RPM REIMBURSEMENT

 Ten state Medicaid programs reimburse some form of remote patient monitoring

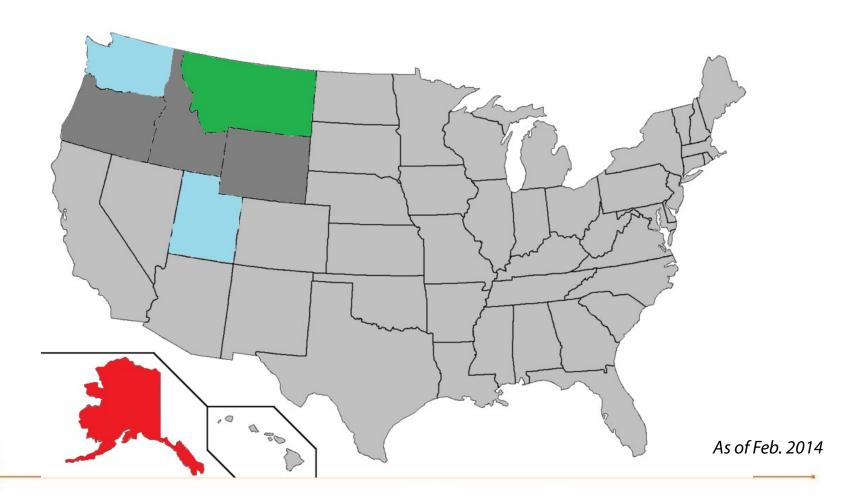




As of Feb. 2014

NWTRC STATES – RPM & S&F

- Alaska RPM & S&F
- Washington & Utah RPM
- Montana S&F



NWTRC STATES – RPM & S&F

Alaska Medicaid

- Reimburses for S&F
- Reimburses for "self-monitoring" defined as "patient is monitored in his or her home via a telemedicine application, with the provider indirectly involved from another location."

Montana Private Payers

 Private payer law requires coverage for services delivered through store & forward technology.



NWTRC STATES – RPM & S&F

Utah Medicaid

 Reimbursement available under UT Medicaid Telehealth Skilled Nurse Pilot Project for Patients in Rural Areas – Series of requirements including must be for diabetes, for patient to be eligible needs to travel over more than 50 paved road miles to obtain in-person services, etc. Unknown how many actually participate in this pilot.

Washington Medicaid

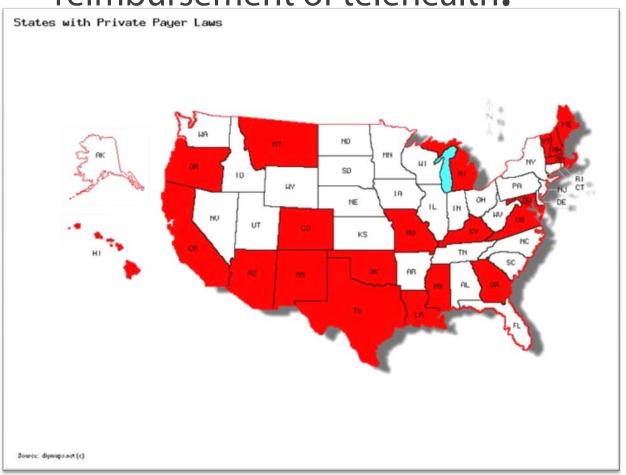
- Assessment & monitoring of clinical data
- Detection of condition changes based upon telemedicine encounter
- Implementation of a monitoring plan



Private Payer Laws

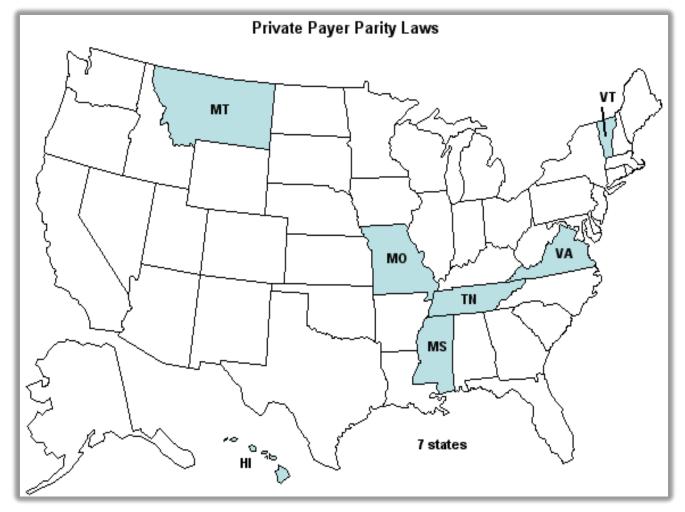
22 states (and DC) have laws related to private payer

reimbursement of telehealth.





States with Private Payer Parity Laws





As of Feb. 2014

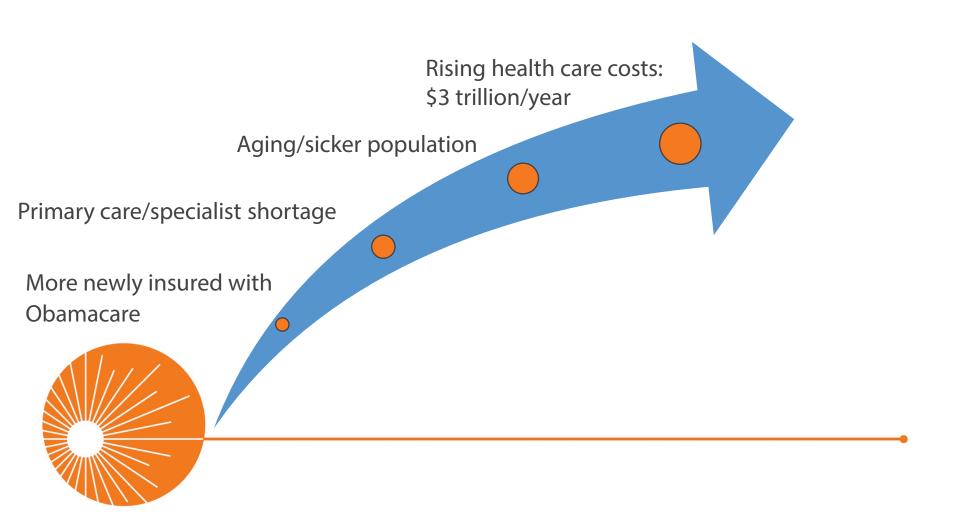
Private Insurer Parity Payment Mandates

"A health insurance carrier shall reimburse for telehealth services under the same reimbursement policies that the benefit plan permits for in-person encounters".

State of Tennessee: effective October 1, 2014



THE CHANGING HEALTHCARE LANDSCAPE: 2014



THE ANSWER TO OUR NATIONAL HEALTH CARE DILEMMA

What can...

- Dramatically EXPAND ACCESS?
- IMPROVE QUALITY?
- **ENHANCE** the patient experience?
- And SAVE MONEY??





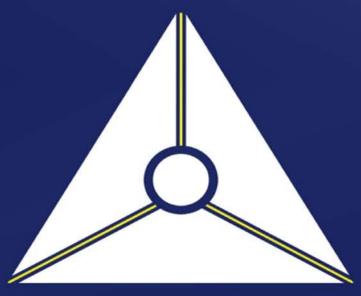
Telehealth and the Triple Aim: A Forum For Advancing Knowledge And Practice

Sacramento, CA April 23, 2014



Triple Aim -

Better health



Better care

Lower cost



Getting from Volume-to-Value

Volume-based

- Pay for service (volume)
- Cost-based reimbursement
- Hospital/physician independence
- Inpatient focus
- Stand-alone care systems
- Illness care

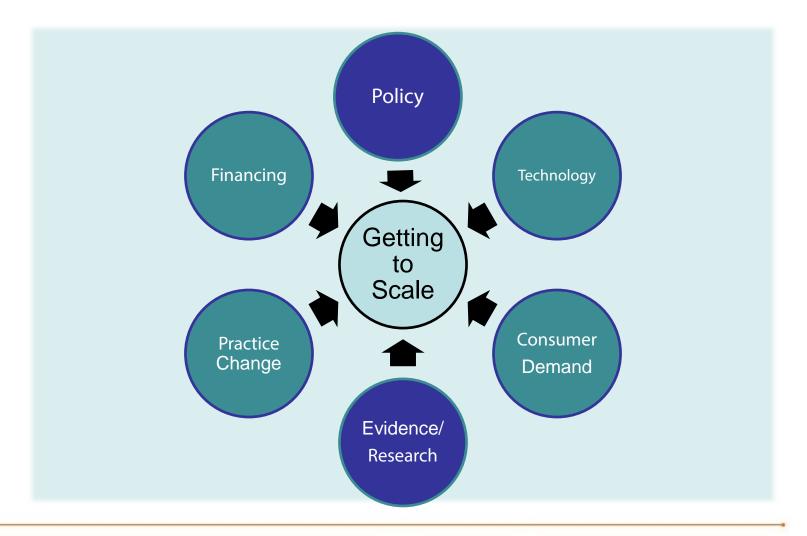


Value-based

- Pay for results (quality/efficiency)
- Shared risk
- Partnerships and collaborations
- Continuum of care
- Community health improvement (HIT)
- Wellness care



GETTING TO SCALE: SIX DRIVERS OF CHANGE





Disruptive Operational Policies

- Digital communications-moving outside traditional four walls
 - Public/Private payers assign value to care delivered virtually comparable to in-person
- Health systems must shift thinking from ROI to R&D to be competitively positioned
- Patient and Provider Incentives Work--Use them.





Solutions in action

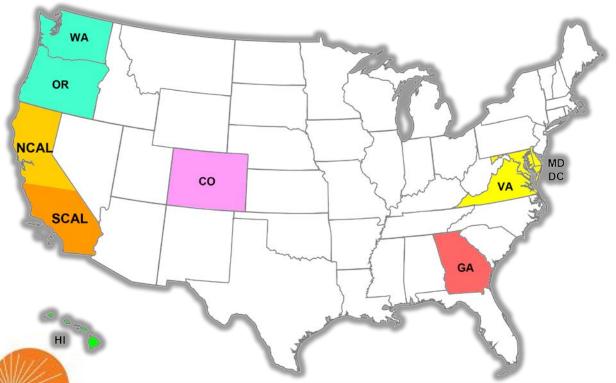
Payers & Providers Working Together



Kaiser Permanente

- Nation's largest nonprofit health plan
- Integrated health care delivery

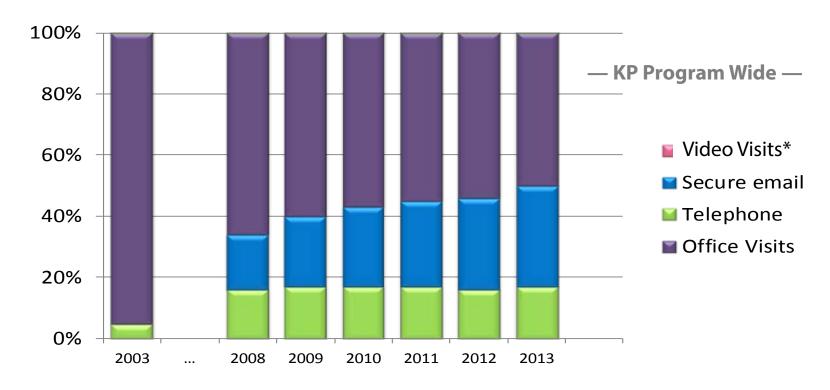
3 Organizations in one: Health insurer, hospital system, physician partnerships



- 9.3M members
- 17K physicians
- 174K employees
- \$53B revenue
- 60% of adult members on kp.org
- Kp.org is part of EHR – a patient portal

Transforming Primary Care Encounters

Care is not just delivered in face-to-face visits now. It is now done on the phone and through secure emails. In 2003, there were essentially 0% secure emails – Now it represents 33% of the primary care patient encounters.





* 4376 in 2013 Source: UCDA Core Value Metrics

Improved engagement, quality, and satisfaction

Member retention

 My Health Manager users were 2.6 times more likely to remain members ¹

Quality of care improved

- 2.0 to 6.5% improvement glycemic (HbA1c), cholesterol, and blood pressure screening and control²
- Refill improves outcomes (LDL) ³

High patient satisfaction

85% rated encounters 8 or 9 on a 9 pt scale⁴



⁴ Internal KP study, "Harvesting Value: Early Findings from Kaiser Permanente HealthConnect™ presented to Center for Information Therapy by T Garrido, C Serrato, J Oldenburg (1/15/2008)



¹ Turley, Marianne; Garrido, Terhilda; Lowenthal, Alex; Zhou, Yi Yvonne, "Association Between Personal Health Record Enrollment and Patient Loyalty," Am J Manag Care. 2012;18(7):e248-e253 (web exclusive)

²Zhou, Yi Yvonne; Kanter, Michael H; Wang, Jian J; Garrido, Terhilda, "Improved Quality at Kaiser Permanente Through E-Mail Between Physicians and Patients," Health Affairs, Vol 29, No 7 (2010); 1370-1375.

³ Sarkar, Urmimala, Lyles, Courtney; Parker, Melissa; Allen, Jill, et al., "Use of the Refill Function Through an Online Patient Portal is associated With Improved Adherence to Statins in an Integrated Health System," **Medical Care**, Vol 00, No 00 (2013)



Sisters of Mercy Health System in St. Louis

Nation's First Virtual Care Center-Opening 2015

Largest Tele-ICU network & 75 other services



"Telemedicine lets us provide the **best possible care** to people where and when they need it – even when patients wouldn't otherwise have **access** to specialists, such as neurologists and pediatric cardiologists,...We've pioneered a telehealth plan that no longer limits advanced care because of age, illness or geography. We can deliver a **higher level of care** to more people, and the virtual care center is at the heart of it – providing care for today while also developing the **health care of tomorrow**."

---Lynn Britton, Mercy president and CEO



Thank You

Mario Gutierrez
Executive Director

mariog@cchpca.org

www.telehealthpolicy.us

